

**STATEMENT OF ECONOMIC INTERESTS**

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BY: te

Please type or print in ink.

2011 MAR -1 AM 11:40

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Lowenthal		Bonnie	A

**1. Office, Agency, or Court**

Agency Name  
California State Assembly  
Division, Board, Department, District, if applicable  
District 54  
Your Position  
Assemblymember

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

<input checked="" type="checkbox"/> State	<input type="checkbox"/> Judge (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input type="checkbox"/> City of _____	<input type="checkbox"/> Other _____

**3. Type of Statement (Check at least one box)**

<input checked="" type="checkbox"/> Annual: The period covered is January 1, 2010, through December 31, 2010. -or- The period covered is ____/____/____, through December 31, 2010.	<input type="checkbox"/> Leaving Office: Date Left ____/____/____ (Check one) <input type="radio"/> The period covered is January 1, 2010, through the date of leaving office. <input type="radio"/> The period covered is ____/____/____, through the date of leaving office.
<input type="checkbox"/> Assuming Office: Date ____/____/____	
<input type="checkbox"/> Candidate: Election Year _____ Office sought, if different than Part 1: _____	

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 12

<input checked="" type="checkbox"/> Schedule A-1 - Investments - schedule attached	<input type="checkbox"/> Schedule C - Income, Loans, & Business Positions - schedule attached
<input type="checkbox"/> Schedule A-2 - Investments - schedule attached	<input checked="" type="checkbox"/> Schedule D - Income - Gifts - schedule attached
<input checked="" type="checkbox"/> Schedule B - Real Property - schedule attached	<input checked="" type="checkbox"/> Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a  
I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/28/11  
(month, day, year)

Signature

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Bonnie Lowenthal</u>

<p>▶ NAME OF BUSINESS ENTITY <u>Johnson &amp; Johnson</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>medical supplies</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Chubb Corporation</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>financial</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Merck &amp; Co.</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>pharmaceutical</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    <u>12</u>/<u>22</u>/<u>10</u> ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Safeway, Inc</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>consumer</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Microsoft corp</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>software</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Texas Instruments, Inc</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>electronics</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>

Comments: \_\_\_\_\_

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Bonnie Lowenthal

<p>▶ NAME OF BUSINESS ENTITY <u>Microchip Technology</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Unilever PLC</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p><u>consumer staple</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Vodafone</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p><u>telecommunication</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Federal Home Loan Management</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p><u>mortgage</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock    <input checked="" type="checkbox"/> Other <u>government &amp; agency bond</u> (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Federal National Mortgage Assoc.</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p><u>financial</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock    <input checked="" type="checkbox"/> Other <u>government &amp; agency bond</u> (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>American Ecology</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p><u>environmental</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                   <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>

Comments: \_\_\_\_\_

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Bonnie Lowenthal

NAME OF BUSINESS ENTITY  
Clearbridge Energy MLP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
energy

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☒ Other closed end fund  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 6 / 24 / 10    / / / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
Mannkind Corp.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
health

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 10 / 9 / 10    / / / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
Genco Shipping & Trading

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
foreign shipping

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 4 / 25 / 10    / / / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
Applied Materials

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
electronics

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 / / / 10    / / / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
JP Morgan Chase

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
financial

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 / / / 10    / / / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
financial

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☐ Other  
 (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 / / / 10    12 / 22 / 10  
 ACQUIRED    DISPOSED

Comments:

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Bonnie Lowenthal

<p>▶ NAME OF BUSINESS ENTITY <u>Magellan Midstream</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>oil pipeline</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000  <input checked="" type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>      </u> / <u>      </u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>Varian Medical</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>healthcare</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>      </u> / <u>      </u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>Zenith National Insurance</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Insurance</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>5</u> / <u>20</u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>JP Morgan Chase</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>financial institution</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock    <input checked="" type="checkbox"/> Other <u>corporate bond</u> (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>      </u> / <u>      </u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>Dentsply</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>healthcare</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>      </u> / <u>      </u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>Hawaiian Electric</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Utility</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>10</u>    <u>      </u> / <u>      </u> / <u>10</u>          ACQUIRED                      DISPOSED         </p>

Comments: \_\_\_\_\_

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Bonnie Lowenthal

NAME OF BUSINESS ENTITY  
Deere & Co.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
farm equipment

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 12 / 3 / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
honeywell

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
business equipment

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 11 / 3 / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
Cheveron Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
energy

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 10 / 27 / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 10    \_\_\_\_ / \_\_\_\_ / 10  
 ACQUIRED    DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Bonnie Lowenthal</u>

► STREET ADDRESS OR PRECISE LOCATION  
711 Cedar Avenue  
CITY  
Long Beach, CA 90813

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 10  
☐ \$10,001 - \$100,000      \_\_\_\_\_ / \_\_\_\_ / 10  
☒ \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
☐ Over \$1,000,000

NATURE OF INTEREST  
☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_ Yrs. remaining      ☐ \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
\_\_\_\_\_  
\_\_\_\_\_

► STREET ADDRESS OR PRECISE LOCATION  
\_\_\_\_\_  
CITY  
\_\_\_\_\_

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000      \_\_\_\_\_ / \_\_\_\_ / 10  
☐ \$10,001 - \$100,000      \_\_\_\_\_ / \_\_\_\_ / 10  
☐ \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_ Yrs. remaining      ☐ \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
\_\_\_\_\_  
\_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_  
INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_%      ☐ None      \_\_\_\_\_  
HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

NAME OF LENDER\*  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_  
INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_%      ☐ None      \_\_\_\_\_  
HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Bonnie Lowenthal</u>
--

<p>► NAME OF SOURCE <u>John A. Perez for Assembly</u>          ADDRESS (Business Address Acceptable)  <u>777 S. Figueroa St, Ste 4050, Los Angeles CA 90017</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 6 / 10</u></td> <td>\$ <u>110.00</u></td> <td><u>leather portfolio</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>12 / 6 / 10</u>	\$ <u>110.00</u>	<u>leather portfolio</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<p>► NAME OF SOURCE <u>California Democratic Party</u>          ADDRESS (Business Address Acceptable)  <u>1401 21st St., Ste 200, Sacramento, CA 95811</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 5 / 10</u></td> <td>\$ <u>84.80</u></td> <td><u>Reception</u></td> </tr> <tr> <td><u>08 / 19 / 10</u></td> <td>\$ <u>38.52</u></td> <td><u>Breakfast</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>12 / 5 / 10</u>	\$ <u>84.80</u>	<u>Reception</u>	<u>08 / 19 / 10</u>	\$ <u>38.52</u>	<u>Breakfast</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>
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<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>																							
<p>► NAME OF SOURCE <u>The California Endowment</u>          ADDRESS (Business Address Acceptable)  <u>1130 K St., Suite 290, Sacramento, CA 95814</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>08 / 24 / 10</u></td> <td>\$ <u>61.32</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>08 / 24 / 10</u>	\$ <u>61.32</u>	<u>Dinner</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<p>► NAME OF SOURCE <u>California Labor Federation</u>          ADDRESS (Business Address Acceptable)  <u>600 Grand Ave., Suite 410, Oakland, CA 94610</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>03 / 08 / 10</u></td> <td>\$ <u>50.00</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>12 / 06 / 10</u></td> <td>\$ <u>16.44</u></td> <td><u>Reception</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>03 / 08 / 10</u>	\$ <u>50.00</u>	<u>Dinner</u>	<u>12 / 06 / 10</u>	\$ <u>16.44</u>	<u>Reception</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>
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<p>► NAME OF SOURCE <u>Boeing</u>          ADDRESS (Business Address Acceptable)  <u>2201 Seal Beach Blvd., Seal Beach, CA 90740</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>07 / 21 / 10</u></td> <td>\$ <u>60.00</u></td> <td><u>Breakfast</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>07 / 21 / 10</u>	\$ <u>60.00</u>	<u>Breakfast</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<p>► NAME OF SOURCE <u>Alliance of Automobile Manufactures</u>          ADDRESS (Business Address Acceptable)  <u>1415 L St., Suite 1190, Sacramento, CA 95814</u>          BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>06 / 28 / 10</u></td> <td>\$ <u>137.56</u></td> <td><u>dinner</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td>\$ <u>          </u></td> <td><u>                  </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>06 / 28 / 10</u>	\$ <u>137.56</u>	<u>dinner</u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>	<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>
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<u>  /  /  </u>	\$ <u>          </u>	<u>                  </u>																							

Comments: \_\_\_\_\_



# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Bonnie Lowenthal</u>
--

▶ NAME OF SOURCE  
Entertainment Software Association

ADDRESS (Business Address Acceptable)  
575 7th St. NW Ste. 300, Washington DC, 20004

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 05 / 10</u>	\$ <u>133.36</u>	<u>Dinner</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

▶ NAME OF SOURCE  
California Medical Association

ADDRESS (Business Address Acceptable)  
1201 J Street, Suite 200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 16 / 10</u>	\$ <u>57.96</u>	<u>Dinner</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

▶ NAME OF SOURCE  
California Tribal Business Alliance

ADDRESS (Business Address Acceptable)  
1530 J Street, Suite 400, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 12 / 10</u>	\$ <u>92.68</u>	<u>Back to session bash</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

▶ NAME OF SOURCE  
Southern CA Edison

ADDRESS (Business Address Acceptable)  
2244 Walnut Grove Ave., Rosemead, CA 91770

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 02 / 10</u>	\$ <u>55.35</u>	<u>Dinner</u>
<u>4 / 24 / 10</u>	\$ <u>200-</u>	<u>Cancer League Gala</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

▶ NAME OF SOURCE  
California Poultry

ADDRESS (Business Address Acceptable)  
4640 Spyress Way, Suite 4, Modesto, CA 95356

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 09 / 10</u>	\$ <u>223.13</u>	<u>Dinner</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

▶ NAME OF SOURCE  
SA Recycling

ADDRESS (Business Address Acceptable)  
3200 E. Frontera St., Anaheim, CA 92806

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 24 / 10</u>	\$ <u>190.00</u>	<u>LB Chamber Dinner</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
Bonnie Lowenthal

► NAME OF SOURCE  
Sherry Kramer

ADDRESS (Business Address Acceptable)  
2041 Rosecrans Ave. #200, El Segundo, CA, 90245

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 15 / 10</u>	<u>\$ 250.00</u>	<u>PV Chamber Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
THUMS

ADDRESS (Business Address Acceptable)  
111 W. Ocean Beach, #800, Long Beach, CA 90802

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 12 / 10</u>	<u>\$ 76.00</u>	<u>Aquarium dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
Long Beach Press-Telegram

ADDRESS (Business Address Acceptable)  
300 Oceangate, Long Beach, CA 90844

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 30 / 10</u>	<u>\$ 110.00</u>	<u>Gala Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
John Ek of Ek & Ek

ADDRESS (Business Address Acceptable)  
610 South Main Street, Los Angeles, CA 90014

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 23 / 10</u>	<u>\$ 300.00</u>	<u>Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
Union Bank

ADDRESS (Business Address Acceptable)  
400 California Street, 13th floor, SFO, CA 94104

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 23 / 10</u>	<u>\$ 350.00</u>	<u>ICT Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
Port of Long Beach

ADDRESS (Business Address Acceptable)  
925 Harbor Plaza, Long Beach, CA 90801

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 29 / 10</u>	<u>\$ 50.00</u>	<u>State of the Port Lunch</u>
<u>7 / 29 / 10</u>	<u>\$ 40.00</u>	<u>CAAP awards lunch</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Bonnie Lowenthal</u>
--

► NAME OF SOURCE  
Palos Verdes Chamber

ADDRESS (Business Address Acceptable)  
707 Silver Spur Rd.#100, Rolling Hills Estates, 90274

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 19 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>
<u>09 / 24 / 10</u>	<u>\$ 20.00</u>	<u>luncheon</u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>

► NAME OF SOURCE  
Bob Bellevue

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 10 / 10</u>	<u>\$ 400.00</u>	<u>L.B. Symphony</u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>

► NAME OF SOURCE  
Keesal, Young & Logan

ADDRESS (Business Address Acceptable)  
400 Oceangate, Long Beach, CA 90801

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 24 / 10</u>	<u>\$ 200.00</u>	<u>Boxer Luncheon</u>
<u>06 / 10 / 10</u>	<u>\$ 25.00</u>	<u>Black Managers Recpt</u>
<u>04 / 18 / 10</u>	<u>\$ 100.00</u>	<u>Grand Prix Reception</u>

► NAME OF SOURCE  
John Kostrenich

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 22 / 10</u>	<u>\$ 92.00</u>	<u>lunch</u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>

► NAME OF SOURCE  
San Pedro Chamber of Commerce

ADDRESS (Business Address Acceptable)  
390W. 7th Street, San Pedro, CA 90731

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 10 / 10</u>	<u>\$ 50.00</u>	<u>Luncheon</u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>

► NAME OF SOURCE  
Port of Los Angeles

ADDRESS (Business Address Acceptable)  
425 S. Palos Verdes St., San Pedro, CA 90733

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 19 / 10</u>	<u>\$ 78.00</u>	<u>LobsterFest tickets</u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>
<u>    /    /    </u>	<u>\$      </u>	<u>          </u>

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> <b>FAIR POLITICAL PRACTICES COMMISSION</b>
Name <u>Bonnie Lowenthal</u>

- Reminder – you must mark the gift or income box.
- You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

▶ NAME OF SOURCE <u>City of Los Angeles</u>	
ADDRESS (Business Address Acceptable) <u>1400 K Street, Suite 208</u>	
CITY AND STATE <u>Sacramento, CA 95814</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): <u>01 / 01 / 10</u> - <u>12 / 31 / 10</u> AMT: \$ <u>420.00</u> <small>(If applicable)</small>	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>Parking at the Los Angeles International</u> <u>Airport</u>	

▶ NAME OF SOURCE <u>CA Foundation on the Environment &amp; the Economy</u>	
ADDRESS (Business Address Acceptable) <u>Pier 35, Suite 202</u>	
CITY AND STATE <u>San Francisco, CA 94133</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
DATE(S): <u>11 / 6 / 10</u> - <u>11 / 18 / 10</u> AMT: \$ <u>11,358.07</u> <small>(If applicable)</small>	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>Study travel project</u>	

▶ NAME OF SOURCE <u>CA Foundation on the Environment &amp; the Economy</u>	
ADDRESS (Business Address Acceptable) <u>Pier 35, Suite 202</u>	
CITY AND STATE <u>San Francisco, CA 94133</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
DATE(S): <u>12 / 09 / 10</u> - <u>12 / 10 / 10</u> AMT: \$ <u>631.81</u> <small>(If applicable)</small>	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>Energy Roundtable Summit</u>	

▶ NAME OF SOURCE <u>CA Foundation on the Environment &amp; the Economy</u>	
ADDRESS (Business Address Acceptable) <u>Pier 35, Suite 202</u>	
CITY AND STATE <u>San Francisco, CA 94133</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
DATE(S): <u>05 / 20 / 10</u> - <u>05 / 21 / 10</u> AMT: \$ <u>389.00</u> <small>(If applicable)</small>	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>Goods Movement Conference</u>	

Comments: \_\_\_\_\_

RECEIVED



APR 13 2011

BY: [Signature]

RECEIVED  
SCHEDULE A-1  
PRACTICES COMMISSION  
Investments

Stocks, Bonds, and Other Investments

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
**AMENDMENT**

► NAME OF BUSINESS ENTITY  
Unilever PLC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Consumer Staple

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Merck & Co.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Pharmaceutical

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      12 / 22 / 10  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

**Verification**

Print Name Bonnie Lowenthal

Office, Agency or Court CA State Assembly D-54

Statement Type      ☐ 2010/2011 Annual      ☐ Assuming      ☐ Leaving  
                                  ☒ 2010 Annual (yr)      ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/13/2011

(d)(5)

Signature [Redacted]

Comments: \_\_\_\_\_